

ADHD OR ATTENTION SEEKING? WAYS OF DISTINGUISHING TWO COMMON CHILDHOOD PROBLEMS

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ABSTRACT

Attention seeking behaviour (implying excessive, inappropriate attention seeking) may lead to major difficulties at home and school and recent research is beginning to clarify the area. Attention deficit hyperactivity disorder (ADHD) also causes great concern. However, the extremely widespread range of attention seeking behaviours may easily lead to their being confused with ADHD.

This paper explores ways to distinguish these two behaviour difficulties. This, it is argued, may help target interventions more efficiently. However, a great deal of further research is called for.

Introduction

The paper is in three parts. The first provides an overview of attention seeking. The second part provides only a very brief account of ADHD and outlines the similarities between attention seeking behaviour and ADHD which may lead to possible confusions, while the final part offers several ways of distinguishing between these two difficulties. A summary of the evidence base is included in an appendix.

PART 1 ATTENTION SEEKING

Definition

Enjoying the attention of others is quite socially acceptable. In some instances, however, the need for attention can lead to difficulties. The term attention seeking is generally reserved for such situations, where excessive and “inappropriate attention seeking” (Armstrong & Drabman, 1994 p.44) is seen. This is the context in which the phrase attention seeking is used in Mellor’s (2005) review of the topic which firmly establishes the evidence base for the occurrence of the problem in many different settings and countries. Only a brief outline of the field of attention seeking can be presented here.

Part of the difficulty in addressing attention seeking, it was felt in the review, could have arisen from problems of definition. For example, 78% of articles surveyed

employed no definition of attention seeking, yet amongst professionals the term attention seeking is not well understood and incorrect attributions may be very frequent (Morgan & Hastings, 1998).

Examining problems of existing definitions of attention seeking and lack of consensus, Mellor (2005) offered a working definition, as an aid to practitioners.

... attention seeking ... [refers] to those behaviours which, through their very irritating nature, bring a child to the attention of a number of adults in a persistent manner over a lengthy period of time, causing great concern. We would exclude, for instance, the sudden reaction of a child to an upset at home lasting for a few days or weeks ... (p. 96).

The salient feature of this definition is the persistent nature of the problem – the existence of behaviours giving rise to major concern over a long time. Routine, minor experiences of attention seeking would not be included in this description, neither would examples of seeking attention through positive, socially acceptable behaviours.

Mellor (2006 and 2008) examines a range of theoretical perspectives and explores factors which might precipitate attention seeking behaviour (such as the birth of a sibling) and factors which might maintain it (especially the adults' response). However, quite apart from problems of definition and background theory, a major part of the misunderstanding over attention seeking may arise because we need to focus on the *functions* of the behaviours, not simply their descriptions.

Attention seeking and the functions of behaviour

Each situation may give rise to its own unique pattern of child behaviours and adult reactions, and a huge variety of activities has been judged, *in certain circumstances*, to be attention seeking. We can see some of this variety in just three authors' examples in Figure 1. These instances serve to highlight the confusion which could arise if we just focused on bald behavioural descriptions to attempt to identify attention seeking.

Figure 1: Examples of behaviours judged to be attention seeking in certain contexts

Licking her nose to make children sick, cheating, destroying her coat. Restlessness, touching other children, picking his nose, crawling under desks etc., dropping things thus providing excuses to grope around rocking on his chair, laughing quietly at nothing in particular, staring at his neighbour until their attention is obtained, moving furniture about, losing worksheets or destroying them, humming, banging under desk with feet. Tantrums; coming without equipment (Montgomery, 1989).
 Putting up his hand to ask unnecessary questions, lying on his back with his legs in the air and banging his head on the desk. Unable to remain in his seat during group work, continually interfering with other children (Merrett, 1993).
 Tics, stammering, bedwetting, temper tantrums, thumb sucking, food refusal, pain in the knees, breath holding spasms, pain in abdomen, headache, hand shaking (Surya Prakash Rao, 1977)

Obviously the context of all these judgements is vital – complaints of pains in the abdomen or other illnesses for example should not routinely be regarded as attention seeking devices, but in certain circumstances they may be, as Barney Tyler illustrates below:

Figure 2: Barney Tyler age 5

Barney is a very demanding, challenging child, constantly seeking attention until he gets the desired effect e.g. by doing the opposite to everyone else, aggravating others around him by pulling their hats off at home time, poking them or leaning on them during quiet times. He enjoys showing adults and peers his “sore knees” or “spots” or “bleeding nose” to gain sympathy. After a recent nose bleed at home, he started to bring a hankie every day and look in the mirror to see if there was any blood.
Extract from Mellor (2008) p. 21

The list of potential examples of attention seeking behaviours appears almost endless, but, within this bewildering range of behaviours, it is the *function* (broadly, the “intended purpose”) of each, not its description, which counts. As noted below, one behaviour can serve a number of functions.

This issue takes us on to a puzzle at the heart of attention seeking. We need to be aware of not just the confusing variety of behaviours which can be included under the label attention seeking but the subjective perception of these by the adult, and that adult’s subsequent reactions. What might be seen by one adult as a behaviour that could be overlooked or handled in a low key manner, such as humming, for another might engender intense feelings of irritation and an inability to ignore it. We are, after all only human, and have our own unique vulnerable spots. Observation in class needs to target interactions i.e. to encompass not just the child’s behaviours but the teacher’s reactions to them. And all of these behaviours must be interpreted within the particular unique context of one adult and one child in one classroom. Another teacher at another time may become engaged in a different sequence of events.

The nature of the adult’s response is a vital factor here (Rogers, 2002 and 2004 discusses strategies to handle attention provided by classmates). An observer will note a relatively predictable set of reactions to whichever of the child’s activities are perceived by that particular adult to be irritating. And these reactions, verbal and non verbal, subtle and overt, will all ultimately serve the same function: in this case, to provide the child with attention. A key question to ask, which shifts discussion more towards the functions of behaviour, is “Does the pupil appear to gain anything from behaving this way?” This question can uncover a range of functions such as seeking attention, withdrawal, revenge or power (Rogers, 2002).

In summary, careful observation, discussion with all interested parties and review of all available evidence is required for a full analysis of the pattern of interacting in order to clarify the function of the behaviours. However, quite apart from issues around definition and functions, the literature reveals a striking paradox.

Attention seeking: neglect of a serious problem

Attention seeking had clearly been neglected in much of the literature, when the enormous time scale (40 years) of the above multiple data base survey covering education, psychiatry and psychology, was taken into account - for example, only six

articles were uncovered during this period, concerning children, with attention seeking in the title, and the topic had not been subject to review. Despite this neglect, there was, paradoxically, strong evidence that attention seeking was a very widespread, and potentially serious, phenomenon (see below) which needed systematic research. Inconsistencies in its inclusion in questionnaires, and even its definition, it was felt, might partly have explained the reason for this paradox.

The review revealed that attention seeking behaviour could lead to very serious difficulties for children, their carers and schools. Montgomery (1989 p.8) reports this to be the highest priority of all behaviour problems identified by teachers on in-service courses. Concern over attention seeking, in a range of different settings, is reinforced by a large number of authors (for details see Mellor, 2005). As part of the paradox, many of these authors actually note the impact of attention seeking but then fail to discuss the issue further.

Expanding the paradoxical aspects further, attention seeking clearly appears in the adult psychiatry literature (e.g. in histrionic personality disorder and Munchausen syndrome) but it has been given almost no consideration in child psychiatry (Mellor, 2003). Within the classification system of the Diagnostic and Statistical Manual IV (American Psychiatric Association, 1994), the category which appears most likely to be able to accommodate attention seeking behaviour is “parent-child relational problem” V61.20 (p. 681) (Simola *et al*, 1999).

The phrase attention seeking also rarely appears in modern standardised instruments regarding children’s behaviour. While it may be argued that the potentially diffuse nature of the concept might lead to difficulties in questionnaire construction, the review found that it had been used successfully in a range of tools from Stott’s (1974) *Bristol Social Adjustment Guide* to the “Behaviour Questionnaire” (Martin & Carroll, 2005). However, such studies as have been conducted differ greatly in their estimates of the prevalence of attention seeking.

Attention seeking: issues of prevalence and intervention

Reports of the prevalence of attention seeking behaviour appear very inconsistent, ranging from about 0.2% to 7% (Mellor, 2005) depending on the definition, and methods and instruments used.

The major time-consuming problem in identifying behaviour patterns as attention seeking, is in analysing the function of the behaviour (O’Neill *et al.*, 1990). However, in parallel, as is normal practice, the practitioner will need to be carrying out a comprehensive assessment to rule out other factors which may be influencing the issue, such as learning difficulties, communication problems, medical or psychiatric complications, bullying, upsets at home, substance abuse etc. (see for example Holloway, 2004). Obtaining the children’s perspective is outlined in detail in Balson (1982, 1989), Dreikurs *et al.* (1982), Mellor (2008) and Rogers (2002).

Following such assessments, there is good evidence that appropriately targeted programmes can be successful and Balson (1982), Dreikurs *et al.* (1982, 2004), Mellor (2008) and Rogers (2002) focus on school based work. Those elements which appear useful in managing attention seeking, such as greatly increased praise, planned

ignoring and low key, appropriate consequences, can also be found in many well established schemes aimed at parents (e.g. Turner *et al.*, 2000).

Thus, summarising the above brief discussion, the existence of attention seeking as a separate entity – a behaviour problem in its own right - its definition and questions of prevalence, origins and interventions all require careful scrutiny. However, the review cited earlier addressed these issues in depth and provided strong evidence that attention seeking behaviour represents a legitimate issue which needs to be addressed. There still remains, however, a particular potential for confusion between attention seeking and ADHD (attention deficit hyperactivity disorder) which needs to be addressed.

PART 2 ADHD (ATTENTION DEFICIT HYPERACTIVITY DISORDER)

ADHD may also cause great anxiety to teachers and carers and may have long term impact on children. It is characterised by inattention, overactivity and impulsivity (American Psychiatric Association, 1994). Carr (2006) provides current overviews, no attempt will be made to summarise the field here.

Recent safety concern over medication for ADHD has been noted (*New Scientist* Mar 3 2007 p.7) There are many other criticisms of ADHD and its treatment (Baldwin & Anderson, 2000; Brown, 2004; Reid & Maag, 1997; Timimi, 2002; Woodhouse, 2004). The editor of the American Journal of Psychiatry has highlighted “serious over-prescribing” of medication (Else, 2005 p.51). It is argued here that resolving some of the confusions between ADHD and attention seeking may help target support more effectively and thus ultimately reduce the demand for medication. This paper continues with the exploration of ways to distinguish attention seeking from ADHD – beginning with their similarities.

Attention seeking and ADHD – similarity and coexistence

Two complications arise immediately when we consider attention seeking and ADHD: similarity and coexistence:

(a) Similarity

Examining the examples of attention seeking behaviours in Figure 1 it is clear that several of these could easily have been associated with ADHD in other contexts i.e. seen as demonstrating inattention, overactivity or impulsivity. We will turn in more detail to the issue of how this confusion may be resolved in Part 3. This topic is the main focus of the current paper.

(b) Coexistence

As noted in the review, attention seeking may also occur in parallel with a wide range of other difficulties and, in particular, children may display both attention seeking *and* ADHD (Cooper & Ideus, 1996; Green & Chee, 1995). In such instances, collaborative work with a local CAMHS team indicates that it is perfectly possible to address the management needs of both ADHD and attention seeking behaviour

together. As an example, both difficulties respond well to positive consequences for the completion of short tasks at home and at school (e.g Carr, 2006).

However, while recognising that full assessment of ADHD is undertaken by CAMHS teams, in many cases teachers and practitioners may be concerned with the early stages of determining whether the presenting problem might be attention seeking *or* ADHD. We thus need to turn to the differences between the two.

PART 3 ATTENTION SEEKING AND ADHD – DIFFERENCES

Recalling that children with ADHD display impulsivity, inattention and overactivity, and assuming ADHD to be expected to appear across different settings such as school and home (Timimi, 2002), then the confusion between ADHD and attention seeking behaviour appears to arise from several areas:

(a) The word “attention”

Two issues arise here which can cause confusion:

(i) The first problem simply concerns different usages of the word “attention”. Children with ADHD are held to have neurological difficulties in *paying attention to* their work. Broadly, they can be seen as having (medical) problems to do with staying on task. Here the word attention roughly refers to the child’s level of concentration.

Children who display attention seeking behaviours, however, *gain attention from* the adults around them. This can occur in a variety of ways, often through misbehaviour, but it is not a result of any neurological condition. Here the word attention refers to being noticed, that is, being noticed by the teacher.

(ii) The second issue, while still focusing on the word attention, further emphasises the conceptual confusions which can arise. Many examples of behaviours which interrupt the flow of learning can be observed in class. One of these can simply be “child stops working”. Now, not completing tasks in class could serve a number of functions related to learning difficulties, boredom, limit testing or a whole host of issues. But the function of this behaviour “stops working” can, in certain contexts after close inspection, be seen to be “gains teacher attention”.

Thus, to illustrate the linguistic complication, we can see how some children who display attention seeking behaviour patterns may at times give poor attention *to* their work, which then gains attention *from* their teachers (see Balson, 1982 and Dreikurs *et al.*, 1982).

Parallel difficulties to “stops working” can be seen at home as the example of Charlotte Wright in Figure 3 shows. Ann Miller (see Figure 6) demonstrates gaining attention in class by not speaking.

Figure 3: Charlotte Wright age 4

<p>Charlotte was taken by her parents to see the family doctor because of “general lethargy”: repeated claims of being tired and lying down, sucking her thumb and pulling her hair, curled up in a baby comfort position (even in the middle of her own birthday party). She was also reported to “withdraw” - show no interest or enthusiasm</p>
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in anything, not talk about things/chat/ask questions and not engage with play or sibling. She appeared sad and bored.

The GP ruled out anaemia and said if she were an adult he would be querying mild depression, but not at her age. Charlotte had 11 hours sleep a night regularly. She was well fed and had a house full of toys and books. Her parents were very supportive and she attended a great nursery. On outings she seemed quite “normal” - asking questions, talking, showing interest.

It turned out there was a new baby in the family and the issue was raised whether Charlotte could be seeking attention in subtle ways. Unfortunately this issue was raised in a rather unsubtle way, at which point the parents were thrown into a frenzy of guilt and worry.

Extract from Mellor (2008) p. 14

(b) The function of the bewildering range of attention seeking behaviours

For accurate interpretation, it is the overall pattern of the misbehaviours which counts - the focus needs to shift away from examining individual behaviours. Thus, for attention seeking to be the appropriate description, the common underlying function of most of the misbehaviours that are observed, must be to gain attention. In class, for example, we need to observe the pattern behind shouting out *and* swearing *and* throwing things *and* running around *and* misusing equipment *and* belching *and* stopping work etc. by identifying the common thread in the interactions set up (Mellor 2008, discusses the practical aspects of this).

Now a proportion of the child behaviours observed within other difficulties such as ADHD, Oppositional Defiant Disorder and Conduct Disorder may also serve to gain attention in the sense used in this paper. But to identify a pattern as attention seeking, gaining attention must be seen to be the dominant function of most of the misbehaviours i.e. the behaviours must stand out as mainly getting attention rather than for instance seeking power.

(c) Behaviours unique to attention seeking

Behaviours attributed to ADHD and behaviours attributed to attention seeking clearly overlap. However, to distinguish attention seeking from ADHD, children displaying attention seeking patterns will often exhibit *additional* behaviours which may not easily be seen as simply fitting the criteria for ADHD of inattention, overactivity and impulsivity. These behaviours are often described by the adult as “irritating” / “silly” / “annoying” / “exasperating” / “frustrating”. They can be perceived relatively clearly as effective in one function: obtaining attention (but not necessarily having other functions such as obtaining power, withdrawal or revenge). Again, this interpretation depends on the context of a particular child and a particular teacher. For example, in Figure 4, Evan’s bizarre behaviours were effective attention getting devices with certain adults.

Figure 4: Evan Moore age 12

Several teachers came after school to discuss Evan. They brought a wide range of, often bizarre, problems that Evan displayed: hiding in the cupboards; walking into walls; cutting things inappropriately; sitting in the middle of the floor, refusing to

move; making peculiar comments and shouting out; having an imaginary friend; over-reacting if he was hurt; when children were absent at register saying they were dead; making random “animal” noises; making karate chops and saying he wanted to eat everyone; swinging on the chair then crawling round the room; putting a noose around his neck and tightening it; shouting out “penis” and “vagina”; curling up in a ball on the floor; using his shoe as a mobile phone; banging his head on a glass panel; climbing onto a coat rack at the end of the lesson and calling the teacher a penis.

The head of year and several teachers commented Evan was doing these “to be irritating, for attention” or “he has to be the centre of attention”. It was pointed out that there had been a great improvement in his work and behaviour in all subjects when he was on report and the report was sent home. Evan liked that. This was, they felt, because he was getting attention at the beginning, during and at the end of each lesson.

Extract from Mellor (2008) p. 76

(d) The role of the adult and the task.

Hill & Cameron (1999) claim that in the one-to-one, children with ADHD settle because the experienced adult “can reduce distractions, bring the child back on task and reinforce focused behaviour” (p.53). NICE. (2000) argue they will concentrate on “things they enjoy” (p.11) but will have difficulty “completing a task or learning something new” (p.11). Wells (2004) points to the positive impact of peer tutoring and computer based tasks.

Casework in Mellor (2008) indicates that the child displaying attention seeking behaviour, by contrast, will generally settle to most tasks, in the presence of almost any calm person (volunteer, school caretaker, secretary, uncle), *with no special effort from the adult*, as long as there is no competition from other children. For instance, parents may report that a non-specialist such as grandad (who has little idea of the finer points of teaching) can easily engage a child who craves attention, for long periods of time, despite trying (very badly) to teach him or her about obscure historical events.

Following this theme, but focusing on the school setting, Evan Moore (see Figure 4) settled when he was “on report” with no special teaching programmes as such being employed. Lucy Nugent, who appears again later, illustrates how even within a somewhat confusing picture it is possible to see a pattern of settling simply with teacher attention, rather than special programmes.

Figure 5: Lucy Nugent age 12

It would seem unwise to conclude that Lucy could not settle to work without special tasks or special instructional approaches as such. Her responses to adults appeared much more determined by her need for attention and the ways in which this played out in the various relationships she encountered. Clearly Lucy could often respond well to carefully thought out 1:1 attention in school, but there was no evidence that her positive reactions were a result of any particular specialist educational programmes or materials... she could in fact tackle quite difficult material.

Extract from Mellor (2008) p.82

In any case, quite quickly after the first interview with parents and their intervention at home with regard to her attention seeking behaviour, Lucy's attitude in class towards her work began to change: "The head of year, Mrs Armstrong, reported that staff had already begun to notice some improvements. It was clear that Lucy wanted good comments on her report" (Mellor2008, p.84) i.e. she did not display any inherent difficulty with impulsivity, inattention and overactivity or need special teaching approaches.

(e) Associated difficulties with social skills and speech and language

Nixon (2001) describes how children with ADHD have social skills difficulties, with peers and "siblings, parents and teachers" (p.176). Casework examples in Mellor (2008) indicate, however, that children displaying attention seeking behaviour can display quite sophisticated social skills e.g. parent's commenting on Bethany Innes age 6 noted "She plays us off - she can read you" (p. 24). Those displaying attention seeking behaviours also often relate poorly to same age peers but generally relate quite acceptably to much younger or much older children, or to adults 1:1, as long as there is no competition from other children of the same age. They may, for example, relate excellently to auntie or to next door's baby. In Figure 6 we see how Lucy could relate very well to others, even baby Ben who she was initially somewhat jealous of.

Figure 6: Lucy Nugent age 12

[Lucy was very attention seeking and demanding at home and in high school] her mother commented that Lucy "Loves it out with me 1:1" and they had been out recently choosing her bedroom furniture. She also finished up talking about how much Lucy had always liked old people and how helpful she had always been with them.

Lucy [had commented at one point] "*I get the most money, Mark and Ben get the most attention. Mum is always helping them. Ben is his [step father's] son, he gets more attention than me*". She had [initially] been upset because baby Ben never came to her but mum had said, "That's because you don't show Ben any love" so Lucy had started to do that and now Ben was coming to her and Lucy was very pleased. Recently both parents had been very firm with her and Lucy had been really good ... and for instance had been helping a lot with Ben, bathing and changing him.

Extract from Mellor (2008) p.12/p.84

It is relevant in this context, where social skills may involve language abilities, to note that Love & Thompson (1988) found that 66% of surveyed children with attention deficit disorder, ADD, clearly displayed significant speech and language disorders. Cantwell & Baker (1991) also emphasise the strong connection between ADHD and speech and language disorders (they underline the very close similarity between ADD and current definitions of ADHD).

As noted in Mellor (2008) attention seeking often seems in fact to involve quite sophisticated language skills. A small scale exploratory survey of past cases (N=19) reported in this publication provided further evidence concerning language issues. This study found that *none* of the children whose main behaviour problem was attention seeking, displayed signs of significant speech and language problems. Thus it was felt that speech and language skills might be one further area on which to focus

in distinguishing attention seeking from ADHD – good language skills being more suggestive of attention seeking.

Ann Miller in Figure 7 illustrates a rather unusual example of apparent language difficulties which actually had their roots in attention seeking.

Figure 7: Ann Miller age 6

During year 1, Ann Miller had not spoken in class to her teachers or classmates. At home she led her parents a merry dance. We worked on her attention seeking behaviour at home [following the approach in Mellor, 2000] and her parents began to clearly see the pattern which had developed. In fact Mrs Miller eventually commented that at school Ann “had them all on a string” - the head teacher, the class teacher, the dinner supervisors, in fact everyone, tried to get Ann to speak. Gradually, as matters settled at home, Ann began to open up at school. The teacher then began to complain she was becoming disruptive with her constant chatter.
Extract from Mellor (2008) p.14.

f. Variation between home and school

While children may display attention seeking behaviours at home and school it is quite possible to see these behaviours in only one setting – often the home. In which case there is a strong indication that the problem is unlikely to be organic in origin i.e. unlikely to be ADHD. Indeed, part of the DSM IV diagnostic criteria for ADHD requires “impairment ... in two or more settings”.

Thus, behaviours which could be indicative of either ADHD or attention seeking, but which are clearly displayed only at home and not at school (where school have instigated no special measures), are more likely to be signs of attention seeking. In Mellor (2004) 20% of cases displayed attention seeking at home and not at school. (Of course, if the behaviour difficulties occur in both settings, which is very common, the possibility of using the variation between the two settings as one distinguishing factor simply does not arise).

In Tom’s case, below, as an interesting illustration, we observe a see-saw pattern of behaviours changing at home then at school, and also a “changing of the goal posts” at school. These can fairly readily be explained on an attention seeking model but not within an ADHD model.

Figure 8: Tom Charlton age 4

April 11 Tom’s adoptive parents, Mr and Mrs Charlton said they had cleared ornaments out of the house and the glass doors had been taken off because he would throw things at them. Parents said they couldn’t take him anywhere. If toys were left around he would throw them at the window and he had smashed the TV. Currently Tom was defiant and would throw himself on the floor. He was swearing a lot and doing it at school also, “he knows he’ll get a reaction”. It was difficult to ignore this in public. He had tantrums. He would go on and on for things “very persistent”. If he wanted something he had to have it now “you can’t explain to him”. He was in nappies when taken outside. At times he had had a poo and spread it about and told parents about this... Tom would bite his hands and if he had a sore spot he’d pick it. When his nose started running he would make it worse, and he also put snot on doors or on people... Mum had taken to going to bed with him and waiting till he fell asleep, he would not stay on his own. He could be in and out of bed continuously for

2½ hours otherwise. We examined an approach to helping Tom as outlined in the book “The Good, the Bad and the Irritating” (Mellor, 2000).

April 25 Mrs Summer, his nursery teacher she rang up to say she was concerned because Tom was having serious outbursts of crying and screaming. His swearing was “horrendous” [he had been settled up till then].

May 2: Mrs Summer said Tom had come in, in a good mood and then went to the toilet and smeared all over the room. She said he was laughing “he knew what he was doing” ... Mrs Summer went on to say “he seems to be moving the goal-posts” i.e. coming up with new difficulties, new misbehaviours to get attention.

May 16: [at a follow-up interview after adopting the new approach] parents said he was 75% improved. Tom liked being praised and would often say to parents “who are you going to tell?” i.e. he wanted them to tell his teacher. At school, Mrs Summer said Tom was now coming in smiling. He was talking in a different voice and seemed more friendly.

Extract from Mellor (2008) p. 77-80

g. The interactional nature of attention seeking

Attention seeking is most easily conceived of as part of an interaction between adult and child, the origins of this interaction are rarely clear. ADHD, however, is held to be a medical condition where the observed behaviours arise because of organic causes. It is not surprising then that interventions with ADHD may take some time. Wells (2004) for instance quotes typical programmes of 8 to 12 sessions of “Parent Training”, sometimes many more.

Successful approaches to attention seeking can be achieved in 2 to 5 sessions (mean 3) (Mellor 2004) and parents often report change after the first day (see Mellor 2008 p.116 and case studies in Mellor 2000). This speedy response is quite understandable if we contemplate the impact of change on any part of an interaction such as that involved in attention seeking. If the adult, for instance, ceases to respond then the interaction cannot continue - simplifying matters a great deal: "Without an audience, the show cannot go on". This interactional nature can also help to explain another puzzling issue: the “vanishing problem” (Mellor 2008 p. 18/98) which can upset observations in class. Perhaps conscious of being observed, both teacher and pupil unwittingly change their behaviours in subtle ways, thus the interaction temporarily collapses. It would be difficult to explain this phenomenon within a medical context.

While these several aspects discussed briefly above may help the practitioner to distinguish attention seeking from ADHD, many questions remain (see below).

Conclusions

This short discussion does not exhaust all aspects of attention seeking and ADHD and clearly a large number of issues need to be explored. This is particularly the case around the concept of attention seeking which has been largely neglected in the literature. However it appears that attention seeking may be distinguished from

ADHD, in many instances, through considering the following aspects (their evidence base, in brackets, is outlined in the appendix):

- a. clarifying the confusion over the meaning of the word “attention” [sources 3,7]
- b. switching focus onto the functions (if any) of the behaviours, e.g. by asking, “Does the pupil appear to gain anything from behaving this way?” [sources 3,7]
- c. noting the presence of behaviours which seem uniquely attention seeking (broadly, irritating and annoying) but which are not easily classified as inattention, overactivity or impulsivity (i.e. not typical of ADHD) [sources 3,7]
- d. observing the positive response of children displaying attention seeking behaviour to adults who could be seen as not particularly expert at teaching and choosing appropriate materials (such as grandad) [source 7]
- e. noting the good social skills (and language skills) shown by children displaying attention seeking behaviours, in settings away from competing peers [sources 4,7]
- f. taking account of the possibility, in some instances, of attention seeking behaviour being displayed in one setting e.g. only at home and not at school [source 5]
- g. noting the (often very quick) response in children when the attention seeking interaction is interrupted [sources 5,7]

Such an exercise in distinguishing the two problems may help tailor interventions more closely to the difficulties encountered. Overall, this may lead to fewer calls for diagnosis of ADHD and subsequent medication. However, a great deal of research is called for concerning attention seeking itself and in validating the distinguishing features outlined above.

Appendix: the evidence base

This paper is part of an ongoing research programme. While being partly theoretical in nature, it draws on a series of separate research initiatives carried out over a 10 year time span employing mixed methods:

1. A survey of referrals within one patch of 15 schools over a three year period to estimate prevalence (Mellor 2008)
2. A literature survey from three major databases in education, psychology and medicine covering a 40 year period (Mellor 2005)
3. A theoretical analysis of concepts (Mellor 2003, 2008)
4. A separate, retrospective analysis, of referrals (N= 19) within one patch over a three year period. This focused on analyzing language aspects (Mellor 2008)
5. A separate analysis of referrals (N=10) in an authority wide scheme over two years, focusing on outcomes (Mellor 2004). Sampling bias means that this probably led to a gross underestimate of “at home only” problems (referrals were accepted as part of a scheme within an L.A educational psychology service – difficulties at school would be the usual trigger for referral, thus “at home only” problems would be rarely referred)

6. Follow up studies of cases (N=12), two to five years after first interview, to examine long term efficacy of intervention (Mellor 2000). These were all the “successful” cases that had been seen within a two year period. These were used to illustrate the book, Mellor (2000) and cases were selected for publication where there were two carers/parents. 100% cases showed good long term results, by parent report.

7. Analysis of indicative case studies (Mellor 2008)

- The paper notes that attention seeking (implying excessive, inappropriate attention seeking) is an established concept which appears in 14 countries and is employed in a number of questionnaire instruments [source 1,2].
- Unfortunately it has largely been ignored by researchers. Estimates of its prevalence range from 0.2% to 7% compared to an ADHD prevalence of 1% to 10% [source 1,2].
- Intervention is shown to be effective within a time-limited model of service delivery and that gains are maintained at long term follow up [source 5,6].

N.B. A great deal of further research is called for, especially in aspects b, c and d above.

Acknowledgements

All names in case extracts have been changed.

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